



Concord Recreation
Before School Program 2016-17
Application
Grades K-5

Child's Name _____ DOB _____ Gender: M F Grade _____ School _____
Last First

Parent/Guardian Name _____

Business Phone _____ Cell Phone _____

Email _____

Parent/Guardian Name _____

Business Phone _____ Cell Phone _____

Email _____

Does your child have any chronic health conditions and/or need special accommodations? Y N

If yes, please describe _____

Monthly Schedule and Tuition

Please check the box for the number of days per week and circle the days of the week. Due to the need to ensure proper staff:child ratios, your child may only attend on the days he/she is registered.

Please circle the days		Cost	Total
<input type="checkbox"/> 5 mornings		\$228	_____
<input type="checkbox"/> 4 days	M T W Th F	\$180	_____
<input type="checkbox"/> 3 days	M T W Th F	\$160	_____
<input type="checkbox"/> 2 days	M T W Th F	\$120	_____
<input type="checkbox"/> 1 day	M T W Th F	\$60	_____

Tuition is billed in 10 equal installments with the first non-refundable installment for June 2017 due at registration. Billing will begin in August for 9 additional payments

Registration Fee: \$50 if received prior to May 27. \$75 May 28 – July 15. \$100 after June 30.

Registration must be received by August 15 for an August 31 start date. No registrations will be processed between August 15 and August 31, 2016.

If my child is accepted, I understand and agree to the following:

My child cannot attend unless all required paperwork/documentation and medical forms (along with necessary medication) have been received by the program.

I hereby give my permission for the registrant to participate in the Before School Program. I understand that the Town of Concord carries no insurance for participant. I agree to hold harmless the Town and/or, its employees and volunteers from any claim or liability related to any accident that may occur. I give my permission for medical treatment if the need arises.

Signature _____ Date _____

Office Use: Date Received _____ Registration Fee _____ Tuition Deposit _____